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•
990

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

2012

OMB No 1545-0047

Department of the Treasury		
Internal Revenue Service	▶_	The organization may have to use a copy of this return to satisfy

Open to Public

		ue Service	► The organization	on may have to use a copy of this	return to satisfy state repo	rting requ	rements	Inspection		
Ā	For the	2012 calend	ar year, or tax year begir	nning	, 2012, and e	nding		, 20		
<u>—</u>	Check if a	applicable	C Name of organization S . C	ENTRAL WASHINGTON RES	OURCE CONSERVATI	ON & D	EVE	D Employer identification no		
$\overline{}$	Address o	• •	Doing Business As					91-1810332		
\equiv	Name cha	-		ex if mail is not delivered to street address)		Room/sui	te	E Telephone number		
二	Initial retu	-	1606 PERRY STR	·		E		(509) 452-8392		
_	Terminate		City, town or post office, state		<u> </u>			1,248,983		
_	Amended		YAKIMA, WA 989					G Gross receipts \$		
\equiv		on pending	F Name and address of princi					G Gross receipts V		
ш	Application	on pending	r Maine and address of printer	pai officei		H(a)	ls this a group r affiliates?	etum for Yes X No		
_	Tax-exem	not atatus [汉]	501(c)(3) 501(c) () ((insert no) 4947(a)(1) or	527			5 5		
	Website		J.SCWRCD.ORG	(insert no) [] 4347(a)(1) 01		H(c)	If "No," attach a Group exemptic	list (see instructions)		
_		organization		ociation 🛛 Other 🕨 NON PROF	FIT L Year of formation 1		M State of le			
	irt I	Summar		ociation El Cuito	E TOBI OF TOTAL CONTINUES OF THE	. , , , ,	W Clate of ic	gai donneile 1722		
	1		*	ion or most significant activities.	SOUTH CENTRAL W	ASHING	TON RC&I	COUNCIL		
	'	•	•	SSUES OF REGIONAL SIGN						
ဥ			********	ENTATION OF INITIATIVE	· · · · · · · · · · · · · · · · · · ·	-				
Activities & Governance				FUTURE GENERATIONS						
Ver	2			discontinued its operations or dis	sposed of more than 25% of	of its net a	issets			
တိ	3		•				- 1	13		
න්	4		-	s of the governing body (Part VI, I						
fies	5		=	n calendar year 2012 (Part V, line						
ξį	6			necessary)			 -	·+		
ĕ			•	Part VIII, column (C), line 12						
				from Form 990-T, line 34						
_		Ttet am ciates	a basiness taxable intente	THOM TO GIVE OF THE OT THE			or Year	Current Year		
	8	Contributions	s and grants (Part VIII, line	1h)			890,72			
ě	9			2g)			030772	1,210,3,3		
ent	10	-		A), lines 3, 4, and 7d)	<u> </u>		1,25	608		
Revenue	11			nes 5, 6d, 8c, 9c, 10c, and 11e)			1,2.	75 000		
_	12			(must equal Part VIII, column (A),			891,97	1,248,983		
	13			X, column (A), lines 1-3)			769,42			
	14		• •	(, column (A), line 4)	F		, 05, 12	0 310,273		
	15		•	e benefits (Part IX, column (A), lin	F	103,00		231,959		
ses	162			column (A), line 11e)	· · · · · · · · · · · · · · · · · · ·			201,333		
ĕÜ	h		sing expenses (Part IX, co			· /////	~	 		
Expenses	17	Other expens	ses-(Part IX column (A) I	nes 11a-11d 11f-24e)			44,88	30,996		
	18	Total expens	es FAMILES 3-17 (must	nes 11a-11d, 11f-24e) equal Part IX, column (A), line 25	5)		917,32			
	19	Revenue les	semenses Subtractione	18 from line 12	,		(25,34			
- vi		1 1				Beginning (of Current Year			
Fund Blances	20	Trofal assets	(Part X, line 16) .			_ ogg	82,85			
d Bi	21		s-(Part-X, Iline 26)				4,27	1		
Ē 3	22		Tung balances. Subtract	line 21 from line 20			78,57			
_	rt II		re-Block							
		s of penjury, I decl	are that I have examined this return	n, including accompanying schedules and per) is based on all information of which pre	statements, and to the best of my	knowledge a	ind belief, it is			
true,	correct, ar	nd complete Deci	aration of preparer (other than office	er) is based on all information of which pre	parer has any knowledge		1			
		FRAN	K HENDRIX	V. Howes				8/12/2013		
Sig	ın	Signatur	e of officer				Da	ite / /		
He	re	FRAN	K HENDRIX, TREASU	RER AND SECRETARY						
		Type or	pnnt name and title	· · · · · · · · · · · · · · · · · · ·						
		Print/Type pre	eparer's name	Preparer's signature	Date	_ c	heck 🗓 if	PTIN		
Pai	d	ROBERT	BONHAM	ROBERT BONHAM	8-8-13	5 se	elf-employed	P00239493		
Pre	parer	Firm's name	ROBERT E	BONHAM EA		Firm's EIN	 			
Us	e Only	Firm's addres	s ▶ 5300 SCE	NIC DRIVE		Phone no				
			YAKIMA V	7A 98908		<u> </u>	509-	966-3258		
				nown above? (see instructions)	<u> </u>		<u> </u>	🛚 Yes 🗌 No		
For	Paperv	vork Reduction	on Act Notice, see the se	parate instructions.				Form 990 (2012)		

Checklist of Required Schedules Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," X 1 2 Х 2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to 3 3 X Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) 4 election in effect during the tax year? If "Yes," complete Schedule C, Part II Х 4 5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, 6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If X 6 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 7 Х 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," 8 Х 9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV Х 10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V Х 10 11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D. Parts VI. VII, VIII, IX, or X as applicable. a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more Х 11b c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII X 11c d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets 11d Х e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 11e f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X X 11f 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Х 12a b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 12b 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 14a Did the organization maintain an office, employees, or agents outside of the United States? Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV Х 14b 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV Х 15 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV Х 16 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) Х 17 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Х 18

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?

20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H

If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

19

20a

20b

Checklist of Required Schedules (continued) Yes No Did the organization report more than \$5,000 of grants and other assistance to any government or organization 21 Χ 21 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States 22 Х on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III 22 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the 23 organization's current and former officers, directors, trustees, key employees, and highest compensated 23 Х Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b Х 24a 24b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 24c d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction 25a 25a Х Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? 25b X Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or 26 Х disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II 26 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, 27 substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled 27 X Was the organization a party to a business transaction with one of the following parties (see Schedule L, 28 Part IV instructions for applicable filing thresholds, conditions, and exceptions). A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28a Х A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Х 28b An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) С was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV 28c 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified Х Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, 31 Х 31 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," Χ 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations Х 33 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, 34 34 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a Х controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable 36 Х 36 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Х Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 38

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Form 990 (2012) Part V

Statements	Regarding	Other	IRS	Filings	and Tax	Compliance

	Check if Schedule O contains a response to any question in this Part V			. 🗆
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c	Х	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 5			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		****	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		Х
b	If "Yes," enter the name of the foreign country:	-		
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	}		
	required to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	_ {		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		<u>X</u>
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g h	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7g 7h	- 1	X
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting	-/::		· ^
•	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring		-	
	organization, have excess business holdings at any time during the year?	8	Ì	
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a	Ì	Х
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		X
10	Section 501(c)(7) organizations. Enter		7	
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders	1		
b	Gross income from other sources (Do not net amounts due or paid to other sources	Ī		
	against amounts due or received from them.)		- [
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O	-		
b	Enter the amount of reserves the organization is required to maintain by the states in which	ŧ		
	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		_X
<u>b</u>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions Check if Schedule O contains a response to any question in this Part VI

<u>Sec</u>	tion A. Governing Body and Management			
		·	Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	-		
	If there are material differences in voting rights among members of the governing body, or		:	
	If the governing body delegated broad authority to an executive committee or similar		-	
	committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with		7,	
	any other officer, director, trustee, or key employee?	2	X	
3	Did the organization delegate control over management duties customarily performed by or under the direct			٠,,
	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		Х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint			
	one or more members of the governing body?	7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			
	stockholders, or persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following.			
а	The governing body?	8a	<u>X</u>	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Х
Sec	ction B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	7,	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
ь	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		٠,,	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
b	Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	-
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"		7.	
	describe in Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	X	•
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			37
a	The organization's CEO, Executive Director, or top management official	15a		X
Ь	Other officers or key employees of the organization	15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions.)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			37
	with a taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its	-		
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16b		
	ction C. Disclosure		_	
17	List the states with which a copy of this Form 990 is required to be filed			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)			
	available for public inspection. Indicate how you made these available. Check all that apply			
4.5	☑ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy,			
••	and financial statements available to the public during the tax year			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the			
	organization: ► SCWRCD (509)452-8392 1606 PERRY STREET SUITE E YAKIMA, W	A 989	902	

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orm	990	(2012)	

S. CENTRAL WASHINGTON RESOURCE CONSERVATION & DEVE

91-1810332

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Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response to any question in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

List persons in the following order: individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons.

(A)	(B)			(0	5)			(D)	(E)	(F)
Name and Title	Average hours per week (list any hours for related organizations below dotted line)	Position (do not check more than one box, unless person is both an officer and a director/trustee) I t d I t O K H c e F n r i n r f e i o m o d ur s u f y g mp r i s e t s i e p e e o e			o r E	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations		
		deo u r a o l r	u e	ř	P O y e e	t s é a e t e d				
(1) ANNA LAEL		١								_
DIRECTOR	0.50	Х	-			ļ		(0	0
(2) FRANK HENDRIX		v								
TREASURER AND SECRETARY	1.00	X				 		(0	0
(3) GLENN MILLER	0.50	Х							0	o
DIRECTOR (4) JOHN TOLONEN	0.50	Λ			_	 		<u> </u>	,	
DIRECTOR	0.50	х							0	o
(5) LAURIE CROWE	0.30	71	┢╌						,	
DIRECTOR	0.50	Х							o	o
(6) LOUIS MUSSO III	1		 	_						
President	1.00	Х							0	О
(7) NICOLE BERG										
DIRECTOR	2.00	Х				İ			o	0
(8) PHIL RIGDON										
DIRECTOR	0.50	Х							o	0
(9) REESE LOLLEY										
DIRECTOR	1.00	X						(0	0
(10)RYAN ANDERSON										
VICE PRESIDENT	2.00	Х				ļ		(0	0
(11)TIM TILLEY										
DIRECTOR	0.50	X						(0	0
(12)TOM COLEMAN										
DIRECTOR	1.50	X	<u> </u>		<u> </u>			(0	0
(13)TONY ARONICA										
DIRECTOR	0.10	X						(0	0
(14)										
		1	1	1	1		1		1	1

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Part	VII Section A. Officers, Directors, Trustees,	Key Employ	yees, a	and	High	nest	Comp	ens	ated Employees ((continued)			
,	(A) (B) (C) (D) Name and title Average Position Reportable (do not check more than one compensation						(E)		(F)				
							•	Reportable		stimated			
		hours per week (list any	1 '				both ar	,	compensation from	compensation from related	ar	nount of other	
		hours for	office	er and	direc	ctor/tn	ustee)		the	organizations	com	pensation	on
		related	I t d	l t	0	к	Нсе	F	organization	(W-2/1099-MISC)		rom the	
		organizations	d u r	n r		e y	gmp	o r	(W-2/1099-MISC)			ganizatio	
		below dotted line)	l s e	t s	1 .	e	ĥρΙ	m e				id related anization	
		"""	vtc	t e	e	m P	e e o s n y	r			0.9		
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		j	a o	;		У	l t						
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(23)													
(24)			1										
(25)													
• •													
1b	Sub-total							•					
С	Total from continuation sheets to Part VII, Section												
d	Total (add lines 1b and 1c)					•				0	 		0
	Total number of individuals (including but not limited									· · · · · · · · · · · · · · · · · · ·			
_	reportable compensation from the organization	1 10 111030 1130	cu ubc	,,,,	*****	1000	CIVCU I	11010	11011 Q 100,000 O1	0			
	reportable compensation from the organization									· <u>·</u>		Yes	No
•	Did the constraint of list and formation	4				h.					[162	NO
3	Did the organization list any former officer, director				ee,	or ni	gnest	comp	pensated				v
	employee on line 1a? If "Yes," complete Schedule J				٠.	• •					3		X
4	For any individual listed on line 1a, is the sum of rep												
	organization and related organizations greater than	\$150,000? If	"Yes,	" cor	mple	te S	chedu	le J f	or such				
	individual										4		X
5	Did any person listed on line 1a receive or accrue of	ompensation	from a	any	unre	elated	d orgai	nızatı	on or individual				
	for services rendered to the organization? If "Yes,"	complete Sch	hedule	J fo	r su	ch p	erson				5		X
Secti	on B. Independent Contractors							•					
1	Complete this table for your five highest compensat	ed independe	ent co	ntrac	ctors	that	t receiv	ved n	nore than \$100,00	0 of			
	compensation from the organization. Report compe	nsation for th	ne cale	ndaı	r yea	ar en	iding w	/ith o	r within the organia	zation's tax			
	year				-		_		•				
	(A)								(8)	T		(C)	
	Name and business address								Description of			ensation	n
K T 1717 T	TAS CO CONS DIST 607 E MNTVW Elle	enghura	WA	980	26				CONTRACTO				,271
		ensburg,	WA .	,,,	20								, 2 , <u>1</u> , 3 6 8
	3702 KERN RD Yakima, WA 98902	7 7-1-1	TAT TA	0.0	900	,			CONTRACTO			-	
N YAI	CIMA CONS DIST 1606 PERRY ST STE C	. rakima,	, WA	98	902	<u> </u>			CONTRACTO	Λ		210	, тат
										<u> </u>			
2	Total number of independent contractors (including			ose	liste	d ab	ove) v	vho					
	received more than \$100,000 of compensation from	the organiza	ation	>						3			

Form 990 (2012) S. CENTRAL WASHINGTON RESOURCE CONSERVATION & DEVE 91-1810332 Part VIII Statement of Revenue Check if Schedule O contains a response to any question in this Part VIII (D) (A) (B) Revenue excluded from tax under sections 512, 513, or 514 Related or Unrelated Total revenue exempt function revenue business Federated campaigns Contributions, Gifts, Grants and Other Similar Amounts Membership dues 1b (150)1c 1d d Related organizations Government grants (contributions) . . 1e 881,805 f All other contributions, gifts, grants, and similar amounts not included above 366,720 g Noncash contributions included in lines 1a-1f: \$ Total. Add lines 1a-1f 1,248,375 **Business Code** Program Service Revenue 2a f All other program service revenue Investment income (including dividends, interest, 608 608 Income from investment of tax-exempt bond proceeds (ı) Real (ii) Personal 6a Gross rents **b** Less: rental expenses c Rental income or (loss) . . . d Net rental income or (loss) . (i) Secunties (II) Other 7a Gross amount from sales of assets other than inventory **b** Less: cost or other basis and sales expenses c Gain or (loss) Other Revenue 8a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18 a **b** Less: direct expenses b c Net income or (loss) from fundraising events . . 9a Gross income from gaming activities See Part IV, line 19 a $b \;\; \text{Less: direct expenses} \quad \dots \quad \dots \quad b$ c Net income or (loss) from gaming activities ▶ 10a Gross sales of inventory, less returns and allowances a **b** Less: cost of goods sold b c Net income or (loss) from sales of inventory ▶ Miscellaneous Revenue **Business Code** 11a C d All other revenue

608

1,248,983

e Total. Add lines 11a-11d

Total revenue. See instructions

Statement of Functional Expenses

Sect	on 501(c)(3) and 501(c)(4) organizations must complete all co	lumns. All other organiz	zations must complete o	column (A)	
_	Check if Schedule O contains a response to any quest	tion in this Part IX	<u></u>	<u></u>	<u> </u>
Do n	ot include amounts reported on lines 6b, 7b,	(A)	(B) Program service	(C) Management and	(D) Fundraising
8b, 9	b, and 10b of Part VIII.	Total expenses	expenses	general expenses	expenses
1	Grants and other assistance to governments and				
	organizations in the United States. See Part IV, line 21 .	940,273	940,273		
2	Grants and other assistance to individuals in				
	the United States. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States See Part IV, lines 15 and 16				***************************************
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salanes and wages	203,236	182,873	20,363	
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	12,000		12,000	
10	Payroll taxes	16,723	15,165	1,558	
11	Fees for services (non-employees):				
а	Management			-	
b	Legal				
C	Accounting	9,571		9,571	
d	Lobbying				
e	Professional fundraising services See Part IV, line 17 .				
f	Other (If line 11g amount exceeds 10% of line 25 column				
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)				
12	Advertising and promotion		···		
13	Office expenses	2,409		2,409	
14	Information technology	243		243	- · · · · · · · · · · · · · · · · · · ·
15	Royalties			213	
16	Occupancy				
17	Travel	1,781		1,781	
18	Payments of travel or entertainment expenses	2,7.02			
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	3,495		3,495	
20	Interest	·			
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	1,467		1,467	· · · · ·
23	Insurance	1,465		1,465	<u> </u>
24	Other expenses. Itemize expenses not covered				
	above (List miscellaneous expenses in line 24e If		1		
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)				·····
а	DUES AND SUBSCRIPTIONS	540		540	
b	OFFICE RENT	8,000		8,000	
С	TELEPHONE INTERNET	1,525		1,525	
d	CHARITABLE DONATIONS	324		324	
е	All other expenses	176		176	
25	Total functional expenses. Add lines 1 through 24e .	1,203,228	1,138,311	64,917	0
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs				
	from a combined educational campaign and		1		
	fundraising solicitation. Check here ► ☐ if				
	following SOP 98-2 (ASC 958-720)				

Form 990 (2012) CENTRAL WASHINGTON RESOURCE CONSERVATION & DEVE 91-1810332 Page 11 Part X **Balance Sheet** (A) (B) Beginning of year End of year 1 Cash - non-interest-bearing 57,684 48,631 2 21,067 2 21,508 3 3 4 153,206 4 5 Loans and other receivables from current and former officers, directors trustees, key employees, and highest compensated employees. 5 Complete Part II of Schedule L Loans and other receivables from other disqualified persons (as defined under section 4985(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary 6 7 7 Assets 8 9 9 10a Land, buildings, and equipment, cost or other basis. Complete Part VI of Schedule D | 10a 8,326 Less accumulated depreciation 10b 5,694 4,099 10c 2,632 b 11 11 Investments - other securities. See Part IV, line 11 12 12 13 13 Investments - program-related. See Part IV, line 11 14 14 15 15 16 Total assets. Add lines 1 through 15 (must equal line 34) 82,850 16 225,977 4,271 17 17 133,273 18 18 19 19 20 20 21 21 Escrow or custodial account liability. Complete Part IV of Schedule D Loans and other payables to current and former officers, directors, 22 iabilitiestrustees, key employees, highest compensated employees, and 22 23 23 Secured mortgages and notes payable to unrelated third parties 24 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X 25 5,695 26 26 4,271 138,968 Organizations that follow SFAS 117 (ASC 958), check here

and Net Assets of Fund Balances complete lines 27 through 29, and lines 33 and 34. 27 27 28 28 29 29 Organizations that do not follow SFAS 117 (ASC 958), check here 🕒 🔀 and complete lines 30 through 34. 30 78,751 30

87,009

87,009

31

32

33

34

(172)

78,579

82,850

31

32

33

34

Paid-in or capital surplus, or land, building, or equipment fund

Retained earnings, endowment, accumulated income, or other funds

Total liabilities and net assets/fund balances

Form	1 990 (2012) S. CENTRAL WASHINGTON RESOURCE CONSERVATION & DEVE 91	1810	0332		Pa	age 1
Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response to any question in this Part XI		<u> </u>	<u></u>		. X
1	Total revenue (must equal Part VIII, column (A), line 12)	1		1,2	48,9	83
2	Total expenses (must equal Part IX, column (A), line 25)	2		1,2	03,2	228
3	Revenue less expenses. Subtract line 2 from line 1	3			45,7	755
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		•	78,5	579
5	Net unrealized gains (losses) on investments	5				
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain in Schedule O)	9		(:	37,3	325)
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line					
	33, column (B))	10		1	37,0	009
Pa	rt XII Financial Statements and Reporting					
	Check If Schedule O contains a response to any question in this Part XII	<u>.</u>	,			
					Yes	No
1	Accounting method used to prepare the Form 990. Cash Accrual Other HYBRID	_				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in					
	Schedule O.			Į		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		L	2a	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or					
	reviewed on separate basis, consolidated basis, or both			1		
	☑ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			1		
b	Were the organization's financial statements audited by an independent accountant?		:	2b	x	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a					
	separate basis, consolidated basis, or both:					
	☑ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			ł		
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight			ŀ		
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?		:	2c	ĺ	X
	If the organization changed either its oversight process or selection process during the tax year, explain in					**********
	Schedule O.					
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in				1	
	the Single Audit Act and OMB Circular A-133?		;	3a	Х	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the					
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		:	3ь	х	

EEA

Form 990 (2012)

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► See separate instructions.

OMB No 1545-0047

2012

Open to Public

Inspection ▶ Attach to Form 990 or Form 990-EZ. Internal Revenue Service Name of the organization Employer identification number CENTRAL WASHINGTON RESOURCE CONSERVATION & DEVE 91-1810332 Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is (For lines 1 through 11, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 3 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state. An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 9 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2), (Complete Part III.) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. c Type III-Functionally integrated b Type Ii d Type III-Non-funtionally integrated By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the q following persons? A person who directly or indirectly controls, either alone or together with persons described in (ii) and Yes Nο (iii) below, the governing body of the supported organization? 11g(ı) 11<u>g(</u>11) (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(III) Provide the following information about the supported organization(s) (i) Name of supported (n) EIN (iii) Type of organization (iv) is the organization (v) Did you notify (vi) is the (vii) Amount of monetary organization (described on lines 1-9 in col (i) listed in your the organization in organization in col col (i) of your above or IRC section governing document? (i) organized in the support? US2 (see instructions)) Yes Yes No No Yes No (A) (B) (C)

Total

(D)

(E)

S. CENTRAL WASHINGTON RESOURCE CONSERVATION & DEVE 91-1810332

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning in) ▶ (a) 2008 (b) 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total Gifts, grants, contributions, and membership fees received. (Do not 868,188 include any "unusual grants.") 860,843 991,385 890,721 1,248,375 4,859,512 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge 991,385 868,188 860,843 890,721 1,248,375 4,859,512 Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 4,859,512 Public support. Subtract line 5 from line 4 . . Section B. Total Support (d) 2011 (c) 2010 Calendar year (or fiscal year beginning in) ▶ (a) 2008 (b) 2009 (e) 2012 (f) Total 860,843 991,385 868,188 890,721 1,248,375 4,859,512 Amounts from line 4 Gross income from interest, dividends, payments received on securities loans. rents, royalties and income from similar 1,195 756 2,403 1,255 608 sources 6,217 Net income from unrelated business activities, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV) 11 Total support. Add lines 7 through 10 4,865,729 Gross receipts from related activities, etc. (see instructions) 12 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) Section C. Computation of Public Support Percentage 99.87 % 15 % 33 1/3% support test - 2012. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this X box and stop here. The organization qualifies as a publicly supported organization 33 1/3% support test - 2011. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here**. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test - 2012. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported \Box b 10%-facts-and-circumstances test - 2011. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

Part III Support Sc

Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Se	ction A. Public Support						
Cale	endar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or bus under sec 513				_		
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year			į			
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6)	, , , , , , , , , , , , , , , , , , , ,			ļ		
Sec	ction B. Total Support						
Cale	endar year (or fiscal year beginning in) 🕨	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9	Amounts from line 6						
I0a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
C	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)	L					:
3	Total support. (Add lines 9, 10c, 11, and 12.)						
4	First five years. If the Form 990 is for the orgonganization, check this box and stop here				s a section 501(c)(▶ □
Sec	ction C. Computation of Public Su						
5	Public support percentage for 2012 (line 8, co	• • • • •	•))	• • • • • • • • •	15	%
6	Public support percentage from 2011 Schedu			<u> </u>	<u> </u>	16	%
	ction D. Computation of Investme					T I	
7 8	Investment income percentage for 2012 (line Investment income percentage from 2011 Sc					17	<u>%</u>
	33 1/3% support tests - 2012. If the organiza	ation did not check	the box on line 14	, and line 15 is mo	ore than 33 1/3%, ar	id line	
b	17 is not more than 33 1/3%, check this box a 33 1/3% support tests - 2011. If the organizatine 18 is not more than 33 1/3%, check this b	ation did not check	a box on line 14 o	r line 19a, and line	e 16 is more than 33	1/3%, and	▶ □
20	Private foundation. If the organization did no	· · · · · · · · · · · · · · · · · · ·	_		· · · · · · · · · · · · · · · · · · ·		

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

2012

Open to Public Inspection

Name	of the organization		Employer identification number
s.	CENTRAL WASHINGTON RESOURCE	CONSERVATION & DEVE	91-1810332
Pa	t I Organizations Maintaining Donor Advis	sed Funds or Other Similar Funds or Ac	
	organization answered "Yes" to Form 990		,
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	4	
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)	881,805	
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisor	s in writing that the assets held in donor advised	
	funds are the organization's property, subject to the organization	_	
6	Did the organization inform all grantees, donors, and dor		
	only for charitable purposes and not for the benefit of the		
	conferring impermissible private benefit?	•	
Pa		he organization answered "Yes" to Form 9	
1	Purpose(s) of conservation easements held by the organ		
-	Preservation of land for public use (e.g., recreation of		rically important land area
	Protection of natural habitat	Preservation of a certific	
	☐ Preservation of open space		
2	Complete lines 2a through 2d if the organization held a q	ualified conservation contribution in the form of a	conservation
	easement on the last day of the tax year.		
	,,		Held at the End of the Tax Year
а	Total number of conservation easements	 	
b	Total acreage restricted by conservation easements		
С	Number of conservation easements on a certified historic		
d	Number of conservation easements included in (c) acqui	• •	
	historic structure listed in the National Register		2d
3	Number of conservation easements modified, transferred		
	tax year ▶	-, , - · · · · · · · · · · ·	gamaagg
4	Number of states where property subject to conservation	n easement is located	
5	Does the organization have a written policy regarding the		
	violations, and enforcement of the conservation easemer	-	
6	Staff and volunteer hours devoted to monitoring, inspecti		_
	•		3 · · , · ·
7	Amount of expenses incurred in monitoring, inspecting, a	and enforcing conservation easements during the	year
	▶\$	· ·	
8	Does each conservation easement reported on line 2(d)	above satisfy the requirements of section 170(h)	(4)(B)
	(i) and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conse.		
	balance sheet, and include, if applicable, the text of the fo	ootnote to the organization's financial statements	that describes the
	organization's accounting for conservation easements.		
Par	t III Organizations Maintaining Collect	ions of Art, Historical Treasures, or	Other Similar Assets.
	Complete if the organization answered "	Yes" to Form 990, Part IV, line 8.	
1a	If the organization elected, as permitted under SFAS 116	(ASC 958), not to report in its revenue statemen	t and balance sheet
	works of art, historical treasures, or other similar assets t	neld for public exhibition, education, or research i	n furtherance of
	public service, provide, in Part XIII, the text of the footnot	e to its financial statements that describes these	items
b	If the organization elected, as permitted under SFAS 116	(ASC 958), to report in its revenue statement an	d balance sheet
	works of art, historical treasures, or other similar assets I		n furtherance of
	public service, provide the following amounts relating to t	hese items:	
	(i) Revenues included in Form 990, Part VIII, line 1 .		▶ \$
	(ii) Assets included in Form 990, Part X		> \$
2	If the organization received or held works of art, historica	I treasures, or other similar assets for financial ga	ain, provide the
	following amounts required to be reported under SFAS 1	16 (ASC 958) relating to these items:	
а	Revenues included in Form 990, Part VIII, line 1		▶ \$
b	Assets included in Form 990, Part X		> \$

0-1	La DATA CONTRACTOR	NOTON BECOM	OCE COM	CEDUAT	TON 5 DE	WE	01 101	1330 Dogg 1
	t III Organizations Maintaining Co						91-1810	
3	Using the organization's acquisition, accession, and							sets (continued)
3	collection items (check all that apply)	u otner records, c	ileck ally c	n the lonov	wing that are	a signific	ant use or its	
а	Public exhibition	d 🗆 100	n or excha	nae nroar	me			
b	Scholarly research	e Oth		nge progra	31115			
	Preservation for future generations	e 📋 Oun	EI					
C	-		4 h. n 4 4	har tha arr			uranaa in Dart	
4	Provide a description of the organization's collectio XIII.	ns and explain no	w triey furt	ner the org	ganizations	exempt pt	irpose in Part	
_		us denstions of su	t biotorioo	l transcura	. or other ou	milar		
5	During the year, did the organization solicit or recei							🗌 Yes 🗌 No
Da.	assets to be sold to raise funds rather than to be m t IV Escrow and Custodial Arrange					newere	t "Ves" to For	
- at	line 9, or reported an amount on				ilization a	i iswei et	i res to ron	111 990, Fait IV,
10	Is the organization an agent, trustee, custodian or c				ther essets	not		
1a	-							🗌 Yes 🗌 No
_	If "Yes," explain the arrangement in Part XIII and co							Lites Lino
ь	ii res, explain the arrangement in Fart Alli and co	omplete the follow	ing table			<u> </u>	1	nount
_	Beginning balance					1c	 	lount
C	99							
d	, , , , , , , , , , , , , , , , , , , ,							
e	Distributions during the year						 	
f	Did the organization include an amount on Form 99							Tyes No
2a	If "Yes," explain the arrangement in Part XIII. Check							_ =
b	**Endowment Funds. Complete if						Port IV line 1	
Fai								
4-	<u> </u>	(a) Current year	(b) Pno	or year	(c) Two year	s back	(d) Three years back	(e) Four years back
1a L		:				+		
þ	Contributions							
С	Net investment earnings, gains, and							
_	losses					-		
ď	Grants or scholarships						_	
6	Other expenditures for facilities and					[
f	Administrative expenses							-
	Administrative expenses					-	 .	
g 2	Provide the estimated percentage of the current year	ar and halance /lir	l an an an an an	mn (a)) ha	ld as:	l l		
	Board designated or quasi-endowment	ar end balance (iii %	ie ig, colu	nin (a)) ne	iu as			
a h	Permanent endowment > %							
b		%						
С	The percentages in lines 2a, 2b, and 2c should equ							
3a	Are there endowment funds not in the possession of		that are h	old and ad	ministered fo	or the		
Ja	organization by:	i tile organization	ulat ale ili	eiu aiiu au	ministered ic	n ui c		Yes No
	m							
								. 3a(i)
b	If "Yes" to 3a(ii), are the related organizations listed							. 3a(ii) . 3b
4	Describe in Part XIII the intended uses of the organ	· ·		• • •				. 30
Par	t VI Land, Buildings, and Equipme			rt X line	10			
						(0) A	esumulated	(d) Book value
	Description of property	(a) Cost or other			r other basis other)		ccumulated preciation	(d) Book value
1a	Land	(,		· ,			
b	Buildings							
C	Leasehold improvements						-	
4	Equipment	·			8,326		5,694	2,632
e	Other				0,320	_	3,034	2,032

Part VII	Investments - Other Securitie	s. See Form 990, Part X, line 12	
•	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial o	derivatives		
(2) Closely-he	eld equity interests		
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
<u>(F)</u>			
(G)			····
<u>(H)</u>			
_(I)			
Part VIII) must equal Form 990, Part X, col (B) line 12) Investments - Program Relate	●	3.
	(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)			
(2)			
(3)	· · · · · · · · · · · · · · · · · · ·		
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
(10)			
) must equal Form 990, Part X, col (B) line 13)	>	
Part IX	Other Assets. See Form 990, P	Part X, line 15.	
		(a) Description	(b) Book value
(1)	• •		
(2)		· · · · · · · · · · · · · · · · · · ·	
(3)			
(5)			
(6)		· · · · · · · · · · · · · · · · · · ·	
(7)			
(8)			
(9)			
(10)			
	n (b) must equal Form 990, Part X, col (B) li	ne 15.)	
Part X	Other Liabilities. See Form 990	, Part X, line 25.	
1.	(a) Description of liability	(b) Book value	7-111
(1) Federal	ncome taxes		
(2) PAYRO	LL LIABILITES	5,695	
(3)			
(4)			
(5)			
(6)			
(7)			
(0)			
(8)		1	
(9)			
(9) (10)			
(9) (10) (11)	must equal Form 990, Part X, col (B) line 25)	▶ 5,695	

	Sid B (1 Gill 330/ 2012	1-181033	2 Page 4
Pa	rt XI Reconciliation of Revenue per Audited Financial Statements With Revenue per	Return	
1	Total revenue, gains, and other support per audited financial statements	1	1,156,120
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12.		
а	Net unrealized gains on investments		
ь	Donated services and use of facilities	1	
c	Recoveries of prior year grants	1 1	
d	Other (Describe in Part XIII.)	1 1	
	Add lines 2a through 2d	2e	
е		3	1 156 100
3	Subtract line 2e from line 1	3 -	1,156,120
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b	1 1	
b	Other (Describe in Part XIII)	1 1	
С	Add lines 4a and 4b	4c	92,863
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	1,248,983
Pa	rt XII Reconciliation of Expenses per Audited Financial Statements With Expenses	per Returi	1
1	Total expenses and losses per audited financial statements	1	1,181,022
2	Amounts included on line 1 but not on Form 990, Part IX, line 25.		
а	Donated services and use of facilities		
b	Prior year adjustments	1	
C	Other losses	1	
d	Other (Describe in Part XIII.)	1	
e	Add lines 2a through 2d	2e	(22,206)
_	Subtract line 2e from line 1	3	1,203,228
3	Amounts included on Form 990, Part IX, line 25, but not on line 1:		1,203,220
4			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4 1	
b	Other (Describe in Part XIII.)	- I	
С	Add lines 4a and 4b	4c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	1,203,228
	rt XIII Supplemental Information		
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4, Part IV, lines 1b and		
Part	V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional transfer of the second	onal	
	mation.		
Ot]	her revenues included on Form 990 (Part XI, line 4b)		
AUD	ITED FINANCIAL STATEMENTS ARE REPORTED ON ACCURAL BASIS WHICH REMOVES 2011 I	TEMS THAT	
WOU	LD HAVE BEEN REPORTED IN 2011, BUT BOOKS WERE TRACKED AS CASH BASIS. THE BO	OKS ARE N	IOW
OPE	RATING ACCURAL BASIS SO FINANCIAL STATEMENTS, GRANT REPORTING, AND TAX RETUR	N WILL BE	2
IN	BALANCE.		
			
EEA		Sched	ule D (Form 990) 2012

		2012 S. CEN				NSERVATI	ON & DEV	E	91-1810332	Page 5
Par	t XIII	Supplement	tal Inform	ation (conti	nued)					
0.2	Othor	ormon a a	a not	i na 1 11 do	d on Fo	~m 000	/Part	VTT 1	ine 2d)	
02.	Other	expense	B HOC	THETude	d OII FO	III 99 <u>0</u>	(Fart	<u> </u>	ine zu/	
AUDI	TED FINA	ANCIAL STAT	EMENTS A	RE REPORTE	ED ON ACC	URAL BAS	IS WHICH	REMOVES	2011 ITEMS THAT	
WOUI	D HAVE E	BEEN REPORT	ED IN 20	11. BUT BO	OOKS WERE	TRACKED	AS CASH	BASIS.	THE BOOKS ARE NOW	
		_								
OPE	RATING AC	CCURAL BASI	S SO FIN	ANCIAL STA	ATEMENTS,	GRANT R	EPORTING,	, AND TAX	RETURN WILL BE	
IN E	BALANCE.									
				 -					·	
		· -								
										
			· · · · · · · · · · · · · · · · · · ·							
										
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Schedule D (Form 990) 2012

EEA

SCHEDULE (Form 990)

Department of the Treasury

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

Inspection

Open to Public. 2012

OMB No 1545-0047

2 □ Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Complete if the organization answered "Yes" to Form 990, (h) Purpose of grant or assistance CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR X Yes Employer identification number (g) Description of non-cash assistance 91-1810332 Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (f) Method of valuation (book, FMV, appraisal, other) 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and (e) Amount of noncash assistance 214,800 120,368 7,210 15,718 235,271 36,804 6,046 12,240 5,204 33,004 (d) Amount of cash grant (c) IRC section if applicable General Information on Grants and Assistance the selection criteria used to award the grants or assistance? 91-6000987 91-1061929 S. CENTRAL WASHINGTON RESOURCE CONSERVAT (p) EIN (2)N YAKIMA CONSERVATION DISTRICT (6) CENTRAL KLICKITAT CONS DISTRIC (9) FRANKLIN CONSERVATION DISTRICT (8)S YAKIMA CONSERVATION DISTRICT (10) INCOLN CONSERVATION DISTRICT (7)BENTON CONSERVATION DISTRICT (3)WA DEPT OF FISH AND WILDLIFF (11) PPER COLUMBIA RC&D COUNCIL 607 E MOUNTAINVIEW A 98926 (1) KITTITAS CO CONS DISTRICT 1606 PERRY SUITE C 98902 (4) WA STATE CONS COMMISSION (a) Name and address of organization or government (5) YAKAMA NATION Name of the organization Parti Part II

Schedule I (Form 990) (2012)

CONTRACTOR

CONTRACTOR

8,713

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

(12FERRY CONSERVATION DISTRICT

For Paperwork Reduction Act Notice, see the Instructions for Form 990. Enter total number of other organizations listed in the line 1 table

19,344

SCHEDULE 1 (Form 990)

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.

Open to Public.

OMB No 1545-0047

2012

Department of the Treasury internal Revenue Service		•	► Attach to Form 990.				Open to Public Inspection
Name of the organization	!					Employer identification number	number
S. CENTRAL WASHINGTON RESOURCE CONSERVATION & DEVE	E CONSERVATION &	DEVE				91-1810332	
Part i General Information on Grants and Assistance	Grants and Assis	tance					
1 Does the organization maintain records to substantiate the amount of the	to substantiate the amour	nt of the grants or assis	tance, the grantees' eli	he grants or assistance, the grantees' eligibility for the grants or assistance, and	assistance, and		
the selection criteria used to award the grants or assistance?							. Tyes II N
5 E	ocedures for monitoring t	he use of grant funds in	the United States				
Part if Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 99 Part IV, line 21, for any recipient that received more than \$5,000. Part II can be dublicated if additional space is needed.	stance to Governme	nents and Organia ed more than \$5.00	zations in the Un 00. Part II can be o	ited States. Compared by the state of the st	olete if the organizational space is needer	tion answered "Y d.	es" to Form 99
1 (a) Name and address of organization	(b) EIN	(c) IRC section	(d) Amount of cash	(e) Amount of non-	(f) Method of valuation		(h) Purpose of gran
or government		ıf applicable	grant	cash assistance	(book, FMV, appraisal, other)	non-cash assistance	
(1) PINE CREEK CONS DISTRICT							
			23,184				CONTRACTOR
(2)BLUE MOUNTAIN RC&D COUNCIL			53,113				CONTRACTOR
(3) OKANOGAN CONSERVATION DISTRICT	:ICT						
			45,674				CONTRACTOR
(4)							_
(5)							
(9)							
(2)							
(8)							
(6)							
(10)							
(11)							
(12)							
2 Enter total number of section 501(c)(3) and government organizations	nd government organization	tions listed in the line 1 table	table				

Schedule I (Form 990) (2012)

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

EXECUTIVE DIRECTOR OR PROGRAM MANAGER TRACKS INCOME AND EXPENSES FOR GRANTS THEY MANAGE USING EXCEL AND ARE RESPONSIBLE FOR MEETING ALL ALL RECEIPTS, INVOICES, AND OTHER FINANCIAL TRANSACTIONS ARE RUN THROUGH THE BOOKKEEPER WHO USES QUICKBOOKS TO Páge 2 BALANCE AND TRACK ALL EXPENSES AND REVENUE, WRITE CHECKS, SEND OUT INVOICES, AND PROVIDE BUDGET REPORTS TO THE BOARD OF DIRECTORS. (f) Description of non-cash assistance Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22 Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional 91-1810332 ADDITION THERE IS AN ORGANIZATIONAL ACCOUNTING PROCEDURES MANUAL THAT ALL STAFF AND CONTRACTORS MUST FOLLOW (e) Method of valuation (book, FMV, appraisal, other) non-cash assistance (d) Amount of S. CENTRAL WASHINGTON RESOURCE CONSERVATION & DEVE (c) Amount of cash grant 5 Part III can be duplicated if additional space is needed line (b) Number of recipients (Part I, 1. Monitoring procedures (a) Type of grant or assistance information. GRANT REQUIREMENTS. Schedule I (Form 990) (2012) Part IV Part III ~ က S ဖ 4

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Schedule I (Form 990) (2012)

EEA

SCHEDULE 0 (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

OMB No 1545-0047

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

▶ Attach to Form 990 or 990-EZ.

S. CENTRAL WASHINGTON RESOURCE CONSERVATION & DEVE	91-1810332
01. Officer, directors, etc. family relationship (Pa	art VI, line 2)
EXECUTIVE DIRECTOR IS THE SISTER IN LAW OF ONE OF THE BOARD MEMBERS	. THIS RELATIONSHIP
HAS BEEN DISCLOSED AND THE BOARD MEMBER IN QUESTION ABSTAINS FROM A	LL DECISONS REGARDING
THE EXECUTIVE DIRECTOR SUCH AS SALARY OR REVIEWS.	
02. Form 990 governing body review (Part VI, line 11	1)
A COPY OF 2012 WAS PRESENTED TO THE BOARD MEMBERS AT THEIR JULY 24T	H, 2013 REGULARY
SCHEDULED BOARD MEETING BY THE TAX PREPARER. ALL PERTINENT ITEMS W	ERE COVERED AND
QUESTIONS ANSWERED. BOARD APPROVED SUBMISSION OF 990.	
03. Conflict of interest policy compliance (Part VI,	, line 12c)
CONFLICT OF INTEREST POLICY WAS UPDATED IN 2012 AND APPROVED BY THE	BOARD OF DIRECTORS AT
THE ANNUAL MEETING IN JANUARY 2012. OUR CONFLICT OF INTEREST POLIC	Y IS UPDATED, REVIEWED,
AND APPROVED EACH YEAR AS NEEDED. ALSO AT OUR ANNUAL MEETING EACH	DIRECTOR RECEIVES AND
SIGNS A STATEMENT THAT THEY HAVE RECEIVED, UNDERSTOOD, AND AGREED W	ITH THE CONFLICT OF
INTEREST POLICY.	
04. Governing documents, etc, available to public (F	Part VI, line 19)
INFORMATION IS AVAILABLE ON WEBSITE: BYLAWS, CONFLICT OF INTEREST P	OLICY, MOST CURRENT AND
PREVIOUS AUDITS, MOST CURRENT AND PREVIOUS 990s, PERSONNEL POLICY M	ANUAL, ANNUAL REPORTS,
IRS LETTER OF DETERMINATION. IN ADDITION WE REGULARY UPDATE OUR PRO	OFILE ON GUIDESTAR,
PROVIDING ALL INFORMATION AS REQUESTED, WE HAVE EARNED THE GUIDESTA	R EXCHANGE MEMBER,
PARTNERS IN TRUST LABEL.	

Schedule O (Form 990 or 990-EZ) (2012)	Page 2
Name of the organization	Employer identification number
S. CENTRAL WASHINGTON RESOURCE CONSERVATION & DEVE	91-1810332
FUNDS FROM THE BONNEVILLE POWER ADMINISTRATION SUPPORTED THE SAVE WATER EN	IERGY PROGRAM,
FUNDS FROM THE ENVIRONMENTAL PROTECTION AGENCY (PASS THROUGH SALMON-SAFE,	PORTLAND)
SUPPORTED THE SALMON SAFE PROGRAM IN YAKIMA, AND NATURAL RESOURCES CONSERV	ATION SERVICE
FUNDS WERE RECEIVED TO SUPPORT SEVERAL PROJECTS FOR THE YAKIMA BASIN CLEAN	WATER
PARTNERSHIP COMMITTEE.	
06. Explanation of other changes in net assets or fund ba	alances (Part XI, line
ADJUSTMENT IS THE ACCOUNTING METHOD FOR FINANCIAL REPORTS BEING PREVIOUSLY	RAN FOR CASH TO
ACCURAL BASIS. THE EXPENDITURES UNDERSTATED DUE TO ALL INVOICES NOT BEING	ENTERED INTO
SOFTWARE TO BE PAID THEY WERE ENTERED AS RECIEVED AND PAID AT THE SAME TIME	E. THE EXPENSES
ARE NOW KEYED IN IMMEDIATELY AND TRACKED FOR BOTH PAYMENT AND GRANT TRACKI	NG SO THAT TAX
REPORTING AND CERTIFIED FINANCIAL STATEMENTS WILL RECONCILE.	

Section 512(b)(13) controlled ž Schedule R (Form 990) 2012 OMB No 1545-0047 <u>(6</u> Direct controlling Open to Public Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had Yes 2012 Inspection entity Employer identification number Direct controlling ε 91-1810332 End-of-year assets **e** Public chanty status (if section 501(c)(3)) Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.) Total income ► Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37. € Related Organizations and Unrelated Partnerships Exempt Code section ਉ Legal domicile (state or foreign country) ▼ See separate instructions. Legal domicile (state or foreign country) છ Pnmary activity <u>e</u> ▶ Attach to Form 990. one or more related tax-exempt organizations during the tax year.) Pnmary activity S. CENTRAL WASHINGTON RESOURCE CONSERVATION & DEVE For Paperwork Reduction Act Notice, see the Instructions for Form 990. Name, address, and EIN (if applicable) of disregarded entity Name, address, and EIN of related organization <u>a</u> Department of the Treasury Internal Revenue Service Name of the organization SCHEDULE R (Form 990) Parti Part II

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(2)

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<u>4</u>

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Page 2

	IV, line 34	
91-1810332	Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 34	
91	"Yes" to Fo	
	on answered	
	e organizatik	tax year.)
N & DEVE	mplete if th	during the
ONSERVATIO	nership (Co	a partnershij
S. CENTRAL WASHINGTON RESOURCE CONSERVATION & DEVE	ile as a Part	treated as
SHINGTON	ions Taxab	rganizations
CENTRAL WA	d Organizat	ore related o
S.	n of Relate	d one or mo
190) 2012	Identification of Related Organizations Ta	because it had one or more related organizations treated as a partnership during the tax year.)
Schedule R (Form 990) 2012	D24 III	Laitin

Schedule R (Form 990) 2012	Schedule R (F							$\frac{1}{2}$		EEA
										(2)
										(9)
										(5)
										(4)
										(3)
										(2)
								· · · · · ·		(1)
Yes No										
(i) Section 512(b)(13) controlled entity?	(h) Percentage ownership	(g) Share of end-of-year assets	(f) Share of total income	(e) Type of entity (C corp., S corp., or trust)	(d) Direct controlling entity	(c) Legal domicile (state or foreign country)	(b) Pnmary activity		ed organization	(a) Name, address, and EIN of related organization
art IV,	rm 990, P	ed "Yes" to Fo	ation answere /ear.)	te if the organizate during the tax y	Trust (Comple poration or trus	Corporation or treated as a cor	Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)	nization ore rela	f Related Orga It had one or mo	Part IV Identification o
										(7)
										(9)
										(5)
										(4)
			-							(3)
										(2)
										(1)
	Yes	(Form 1065)	Yes			excluded from tax under sections 512-514)		foreign country)		
(K) · Percentage ownership	(j) General or managing	(i) Code V-UBI amount in box 20 of Schedule K-1	(h) Disproportionate allocations?	(g) Share of end-of- year assets	(f) Share of total income	(e) Predominant income (related, unrelated,	(d) Direct controlling entity	(c) Legal domicile	(b) Pnmary activity	(a) Name, address, and EIN of related organization

Page 3

91-1810332

Transactions with Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35b, or 36.) Part V

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule				<u>×</u>	Yes No	÷
1 During the tax year, did the organization engage in any of the following transactions with one or more relat	isactions with one or more related organizations listed in Parts II-IV?	: II-IV?				
a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity				1 a		I
b Gift, grant, or capital contribution to related organization(s)				1b		l
c Gift, grant, or capital contribution from related organization(s)				10	-	I
d Loans or loan guarantees to or for related organization(s)		•		19		ŀ
e Loans or loan guarantees by related organization(s)				1e		1
f Diudands from related organization(s)				77		1
				= .	-	i
				19		-1
h Purchase of assets from related organization(s)				두		ı
i Exchange of assets with related organization(s)				;		ı
j Lease of facultues, equipment, or other assets to related organization(s)				1.		I
						I
K Lease of facilities, equipment, or other assets from related organization(s)				*		
l Performance of services or membership or fundraising solicitations for related organization(s)				11		ı
m Performance of services or membership or fundraising solicitations by related organization(s)				1		1
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)		•	•	Ę		1
o Sharing of paid employees with related organization(s)				5		i
				2	-	ŧ
p Reimbursement paid to related organization(s) for expenses					·	
				. <u>5</u>		1
				•		ļ
r Other transfer of cash or property to related organization(s)				7-	<u></u>	1
اء.				18		١
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this l	on on who must complete this line, including covered relationships and transaction thresholds.	hips and transaction thr	esholds.			ı
(a)	(q)	(၁)	(q)			
Name of other organization	Transaction type (a-s)	Amount involved	Method of determining amount involved	amount invo	olved	
(1)MID COLUMBIA FISHERIES ENHANCEMENT GROUP	q	46,117	ACTUAL			I
(2)						1
(3)						ı
(4)						1
(5)						
(9)						
EEA			Schedul	Schedule R (Form 990) 2012	390) 2012	ı

91-1810332

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

Percentage ownership Schedule R (Form 990) 2012 3 General or managıng partner? Yes Code V-UBI amount in box 20 of Schedule K-1 (Form 1065) \equiv Disproportionate allocations? ŝ $\overline{\boldsymbol{\varepsilon}}$ Yes (g) Share of end-of-year assets Share of total income Are all partners section 501(c)(3) organizations? Yes No <u>e</u> Predominant noome (related, unrelated, excluded from tax under section 512-514) 9 Legal domicile (state or foreign country) છ Primary activity 9 Name, address, and EIN of entity E (16) 5 (12) (13) (15) EF (14) Ξ 3 ල ₹ (2) 9 ϵ 8 6

Statement of Program Service Accomplishments Name(s) as shown on return S. CENTRAL WASHINGTON RESOURCE CONSERVATION & DEVE 91-1810332

FORM 990, PART III(A)

PROGRAM SERVICE CODE

PROGRAM SERVICE EXPENSES \$5612

GRANTS AND ALLOCATIONS INCLUDED IN ABOVE EXPENSE \$5612

PROGRAM SERVICES REVENUE \$10206

EXPLANATION

RC AND D IS A FISCAL SPONSOR FOR THE TAPASH SUSTAINABLE FORESTS COLLABORATIVE, A COLLABORATION OF STATE, FEDERAL, AND LOCAL ENTITES WORKING TO IMPROVE FOREST HEALTH ALONG THE EASE CASCADES. WE RECEIVE FUNDS FROM A DONOR ADVISED FUND WITH THE YAKIMA VALLEY FOUNDATION INTENDED TO HELP ADVANCE THE MISSION OF THE TAPASH. FUNDS ARE USED TO ADVANCE FOREST HEALTH GOALS THROUGH RESEARCH, ON THE GROUND FORESTRY WORK, FOREST TREATMENT, AND OTHER SMALL PROJECTS.

Statement of Program Service Accomplishments

2012 01

Name(s) as shown on return

Your Social Security Number

S. CENTRAL WASHINGTON RESOURCE CONSERVATION & DEVE

91-1810332

FORM 990, PART III(B)

PROGRAM SERVICE CODE

PROGRAM SERVICE EXPENSES \$8572

GRANTS AND ALLOCATIONS INCLUDED IN ABOVE EXPENSE \$8572

PROGRAM SERVICES REVENUE \$9055

EXPLANATION

SALMON-SAFE IS A CERTIFICATION AND MARKETING PROGRAM THAT WORKS THROUGH PLACE BASED PARTNERSHIPS TO HELP IMPROVE AGRICULTURAL OPERATIONS FOR THE BENEFIT OF WATER QUALITY AND SALMON HABITAT, AND HELP AGRICULTURAL PRODUCERS FIND VALUE ADDED MARKETS FOR THEIR PRODUCT. THE SOUTH CENTERAL WASHINGTON RESOURCE AND CONSERVATION DEVELOPMENT COUNCIL (SCWRC AND D) PROVIDES OUTREACH AND MARKETING TO AGRICULTURAL PRODUCERS IN THE YAKIMA VALLEY. RECENT SALMON-SAFE SUCCESSESS IN THE YAKIMA AREA INCLUDE OUTREACH TO MULTIPLE GROWERS, TO COMPLETE ASSESSMENTS, THE COLLECTION OF SPRAY RECORDS FOR APPROXIMATELY 3,400 ACRES WITH OVER 150 ACRES OF ORGANIC HOPS CURRENTLY TRANSITIONING TO SALMON-SAFE STANDARDS WITH THE REMAINING ACRES PRESENTLY UNDER REVIEW.

•		Statemen	2012 01			
Name	(s) as shown on return				<u> </u>	Your Social Security Number
s.	CENTRAL	WASHINGTON	RESOURCE	CONSERVATION	& DEVE	91-1810332

FORM 990, PART III(C)

PROGRAM SERVICE CODE

PROGRAM SERVICE EXPENSES \$46117

GRANTS AND ALLOCATIONS INCLUDED IN ABOVE EXPENSE \$46117

PROGRAM SERVICES REVENUE \$50884

EXPLANATION

WASHINGTON DEPT OF ECOLOGY USED TO SUPPORT THE REECER CREEK FLOODPLAIN RESTORATION PROJECT AS PART OF THE YTAHP PROGRAM

Form 4562

Depreciation and Amortization (Including Information on Listed Property)

OME	3 No	154	5-0	172

2012

Department of the Treasury Attachment 179 See separate instructions. ▶ Attach to your tax return. Sequence No Internal Revenue Service Business or activity to which this form relates Identifying number CENTRAL WASHINGTON RESOURCE C FORM 990 -91-1810332 Part I **Election To Expense Certain Property Under Section 179** Note: If you have any listed property, complete Part V before you complete Part I 1 2 2 3 Threshold cost of section 179 property before reduction in limitation (see instructions) Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-4 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing (b) Cost (business use only) 6 (a) Description of property (c) Elected cost Listed property Enter the amount from line 29 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 9 10 Carryover of disallowed deduction from line 13 of your 2011 Form 4562 10 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions) 11 Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11 12 Carryover of disallowed deduction to 2013 Add lines 9 and 10, less line 12 Note: Do not use Part II or Part III below for listed property. Instead, use Part V. Special Depreciation Allowance and Other Depreciation (Do not include listed property) (See instructions) Special depreciation allowance for qualified property (other than listed property) placed in service Property subject to section 168(f)(1) election 15 Other depreciation (including ACRS) MACRS Depreciation (Do not include listed property.) (See instructions.) Section A 17 MACRS deductions for assets placed in service in tax years beginning before 2012 1,467 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B - Assets Placed in Service During 2012 Tax Year Using the General Depreciation System (b) Month and year (c) Basis for depreciation (d) Recovery (a) Classification of property (business/investment use (e) Convention (f) Method (g) Depreciation deduction service only-see instructions) 19a 3-year property b 5-year property 7-year property d 10-year property 15-year property 20-year property 25-year property 25 yrs Residential rental 27.5 yrs MM S/L property 27.5 yrs. MM S/L MM Nonresidential real 39 yrs S/L MM property Section C - Assets Placed in Service During 2012 Tax Year Using the Alternative Depreciation System 20 a Class life S/L 12-year 12 yrs S/L 40-year ММ 40 yrs S/L Part IV Summary (See instructions) 21 Listed property Enter amount from line 28 21 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return Partnerships and S corporations - see instructions 1,467 22 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs 23